	0336958	3493	
Γ	OBTS Number	ARREST / NOTICE TO APPEAR Juvenile Referral Report 1. Arrest 2. N.T.A. 4. Request for Capias Juvenile Referral Report	venile
Σ	Agency ORI Number Agency Na	1	1)
MINISTRATIV	Charge Type: Check as many as apply. 1 Felony 2. Traffic Felony	3. Misdemeanor 5. Ordinance If Weapon Seized Multiple Clearance	
ADMIN	Location of Arrest (including Name of Business)	Location of Offense (Business Name, Address)	
	Date of Arrest 3 Time of Arrest	Booking Date Booking Time Jail Date Jail Time Location of Vehicle	
T	Name (Last, First, Middle)	EDMUNDO PEREZ	
	Race W - White I - American Indian B - Black O - Oriental/Asian	Date of Birth Height Weight Eye Color Hair Color Complexion Build	20
	Scars, Marks, Tatoos, Unique Physical Features (Locat		Unk
DEFENDAN	Local Address (Street, Apt. Number)	(City) (State) (Zip) Phone Residence Type: 1. City 3. Florida 2. County 4. Out of State	2
ä	Permanent Address (Street, Apt. Number)	(City) (State) (Zip) Phone Address Source	<u> </u>
ĺ	Business Address (Name, Street)	(City) (State) (Zip) Phone (Ccupation (Thest MATE	
	D/L Number, State P626 200 P2252 0	INS Number Place of Birth (City, State) Citizen	
岸	Co-Defendant (Last, First, Middle)	Race Sex Date of Birth 1. Arrested 3. Felony 4. Missdemea 5. Juvenile	anor
8	Co-Defendant (Last, First, Middle)	Race Sex Date of Birth 1. Arrested 3. Felorry 4. Misdemea 5. Juvenile	inor
	Parent Name (Last) Legal Custodian Other:	(Middle) Residence Phone	
	Address (Street, Apt. Number)	(City) (State) (Zip) Business Phone ()	
ENLE		Juvenile Disposition 1. Handled/Processed within 2. TOT HRS/DYS Dept. and Released. 3. Incarcerated	
3	Released To: (Name)	/ Relationship Date Time	
	to keep the Juvenile Court Clerk's Office (Phone 355-2 Yes, by: (Name) Property Crime? Description of Property	nd / or	le
30	☐ Yes ☐ No		Jaknowa
10	Drug Activity S. Sell R. Smuggle N. N/A B. Buy D. Deliver F. Possess T. Turfic E. Use	Distribute Produce/ N. N/A C. Cocaine M. Marijuana Equipment Z. C. Cocaine A. Amphetamine E. Heroin O. Opium/Deriv. S. Synthetic	Other
CHARGE	Pomes 71 C BATTERY Drug Activity Drug Type Amount / Unit	Offense # Warrant / Capias Number Bond	
Ō	Charge Description	13-147-547 Counts Domestic Statute Violation Number Violation of OF	RD#
CHARGE	Drug Activity Drug Type Amount / Unit	Offense # Warrant / Capias Number	
Н	Charge Description	Counts Domestic Statute Violation Number Violence Violence	3D #
CHARGE	Drug Activity Drug Type Amount / Unit	Offense # Warrant / Capias Number 48 ond	
⊢	Charge Description	Counts Domestic Statute Violation Number Violence	3D#
CHARGE	Drug Activity Drug Type Amount / Unit	Offense # Warrant / Capias Number Bond	
_	Location (Court, Room Number, Address)	ANIO 5	
APPEAF	Court Date and Time Month Day	Year Time A.M. P.M. TO SEE	
NOTICE TO APPEAR	I AGREE TO APPEAR AT THE TIME AND PLACE D	DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT SHOULD I WILLFULLY I I THIS NOTICE TO APPEAR, THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED	FAIL TO
NOT	Signature of Detendant (as Issuerille and Par	Pata Signad	i
	Signature of Defendant (or Juvenile and Par HOLD for other agency	Parent/Custodian Date Signed Name Verification (Printed by Arrestee) SCANNED	
ADMIN	Dangerous Resisted Arrest Suicidal Other.	Marrie of Arresting Officer (Print) I.D. # (RRINT)	PAGE
	Intake Deputy I.D. # Pouch #		OF /

Γ	OBTS Number PROBABLE CAUSE AFFIDAVIT 1. Arrest 3. Request for Warrant Juvenile								
ADMIN.	Agency ORI Number Agency Name 2. N.T.A. 4. Request for Capias Agency Report Number								
18	FLO 5 0 0 0 0 0 PALM BEACH COUNTY SHERIFF'S OFFICE 0 6 - 3 - 4 7 5 7 7 1 1 Sheck as many 1. Felony 3. Misdemeanor 5. Ordinance Special Notes:								
DEF.	as apply 2. Traffic Felony 4. Traffic Misdemeanor 6. Other Alias Race Sex Date of Birth Rane (Last, First, Middle) Race Sex Date of Birth O 7 1 2 8 2								
SES D	Charge Description Charge Description								
CHARG	Donestic AGG BATTERY PREGNANT WOMEN Charge Description Charge Description Charge Description								
۲	Victim's Name (Last, First, Middle) Race Sex Date of Birth LN F / /								
ICTIM	Local Address (Street, Apt. Number) (City) (State) (Zip) Phone Address Source 1987 June Ro. June Beach F. 340 & (SCI) 596 2363 VIETO								
>	Business Address (Name, Street) (City) (State) (Zip) Phone Occupation								
	The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above Defendant committed the following violation of law. The person taken into custody								
	committed the below acts in my presence. who told that he/she saw the arrested person commit the below acts. admitting to the below facts. was observed by who told that he/she saw the arrested person commit the below acts. Swas found to have committed the below acts, resulting from my (described) investigation								
	admitting to the below facts. Solvent in the below acts, resulting from my (described) investigation. On the								
	I MET WITH ASHLEY PEREZ AT STAR BYCKS coffee AT U.S. Huy								
	1 AND PGA BLUD. SHE STATES THAT HER HUSBAND EDMUNDO								
	WANTED TO GET INTIMATE WITH HER SHE TOLD Him SHE HAD AN								
}	Appointment AT 2 pm. EDMUNDO got MAD AND BEGAN SLAMMING								
	ITEMS AROUND THE HOME AND BANGING DOORS. HE BECAME VERY								
	AggResive. AsHLOY yelled At thin To stop, EDMUNDO THEN CAME								
	TOWARDS ASHLEY AND GRABBED HER BY THE NECK WITH HIS HAND								
IN IN	Picked Her up AND THREW HER AGAINST THE BAR. HORBA								
FATEM	Hit THO BAR. HE THEN GRABBED HER NECK AGAIN AND								
JSE S	THREW HER ON THE GROUND BELLY FIRST. ASHley got								
LE CAUSE	Up AND RAN OUT OF THE Home AND CALLED 911.								
PROBABL	ASHLEY IS 15 Weeks pregANANT WITH CHILD, AND WANTE								
뷥	To Bo examined By PARAMEDIES ON SCENE. SHE WAS CONFERNO								
	ARUT HER BABY - PHOTO'S WERE TAKEN OF HER INTURYS								
	EDMINOS WAS LOCATED AT THEIR Home AND ARRESTED FOR								
	AGG. BATTERY ON PREGMANT WOMEN AND AGG. BATTERY BY STATISTY TOUR.								
	MIRANDA WAS READ TO KOMUNDO MAD HE UNDERSTOUD. TRANSPORTED								
	TO P.B.C. JAIL AND Booked. THO ASHLEY STATED TOM								
	Stre (640N7 BREATH) DE YELL WHEN HE HAD HER TELL TOND								
ΝĒ	COUNTY OF PALM BEACH SOLI								
ADMINISTRATIVE	(Signature of Arresting/Investigative Officer) The foregoing instrument was syorn to or affirmed and subscribed before me this 23 day of WORD WARMETO 13 by 15 June 10 June 1								
DMINI	(Print name of Arresting-Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced NOV 2 4 2013								
	Notary Public, Clerk of Court, Officer (F.S.S. 117.10)								
ᇦ	SO # 0004 REV. 04/01 DISTRIBUTION: WHITE — Court Copy GREEN — State Attorney YELLOW — Agency PINK — Agency								

PALM BEACH COUNTY SHERIFF'S OFFICE DOMESTIC VIOLENCE PROBABLE CAUSE SUPPLEMENTAL FORM (SUBMIT WITH STATE ATTORNEY'S COPY OF PROBABLE CAUSE AFFIDAVIT)

CASE NUMBER: 13-147547	
DEFENDANT'S NAME: EDMUNDO PEREZ	Rangiero
DEFENDANT'S STATEMENT: AYES NO (IF YES: WRITTE	· - · · · · · · · · · · · · · · · · · ·
SYNOPSIS: 5the is CHEATING ON HIM	AND HE SPABBED HER
- Cell PHONE OUT OF HER F	tano And frostred HER
VICTIM'S NAME: Ashley Perez	
VICTIM'S STATEMENTS: AYES ONO (IF YES: WRITTEN	☐ TAPED ☐ ORAL)
OBSERVATIONS OF VICTIM: (PHYSICAL & EMOTIONAL)	
Upsey - emorional - CRYING WA	4 INJORY S
RELATIONSHIP BETWEEN VICTIM AND SUSPECT: MAKER	eb
<u>.</u>	
PHOTOGRAPHS: SCENE: YES ONO VICTIM (S): YES	`□ NO
911 CALL: TYES IN NO WHO CALLED:	
WEAPON USED: YES ANO TYPE:	
MEDICALTREATMENT: ZYES □NO	
AT SCENE: PSCFR	
AT HOSPITAL: ☐ YES ☐ NO HOSPITAL:	PHYSICIAN:
ARE CHILDREN LIVING IN HOME → YES □ NO	Δ -
NAME: AMALIA MAR PEREZ	DOB: D-24-11
NAME:	DOB:
NAME:	DOB:
	,
WAS ACT(S) COMMITTED IN PRESENCE OF MINOR(S): ☐ YES	NO (IF YES 📮 SAME AS ABOVE OR SPECIFY)
NAME:	DOB:
NAME:	
NAME:	
DCF NOTIFIED: (IF CHILD ABUSE) ☐ YES ☐ NO	VICTIM PREGNANZ: YES \ \ \ NO
PRIOR HISTORY OF DOMESTIC VIOLENCE: YES NO	ALCOSOLOR DRIESTINVOLVED: TYES INO
VIOLATION OF RESTRAINING ORDER: ☐ YES ✓ NO CASE #	NOV 2 4 2013
ALTERNATE VICTIM CONTACT INFORMATION: (IF VICTIM I	DECIDES TO LEAVE RESIDENCE)
RELATIVE/FRIEND NAME: LINGA JOYCE RELATIVE/FRIEND ADDRESS: 95 DORCHESTER "E	PHONE: 367- 396. 1900
RELATIVE/FRIEND ADDRESS: 95 DORCHESTER "E	" WPB FR 37417
PBSO #0004A REV. 01/01	

SUSPECT/OFFENDER:

VICTIM NOTIFICATION FORM

This form must be completed when one of the following crime(s) has been committed:

- **Homicide** (Ch. 782)

- Sexual Offense (Ch. 794)

- Attempted Murder

- Attempted Sexual Offense

- Stalking (F.S. 784.048)
- Domestic Violence (This includes any assault, aggravated assault, battery, aggravated battery, sexual assault, sexual battery, stalking, aggravated stalking or any criminal offense resulting in physical injury or death of one family member or household member by another, who is or was residing in the same single dwelling.)

Upon completion, this form must accompany the booking paperwork. If applying for a warrant, attach this form to the filing packet.

1.	Incident Reno	ort.#: 13	14754	7	Agency:	PRSO			
	Offense: /	DOMOSTIC	RATTER	L		ľ			
	Suspect/Offer	nder EDN	2000	EREZ Ru	OPi GUE				
	D.O.B. 7	7.82	Race:	W	Sex	:_m			
	_,	,							
2.	Warrant #(s):								
•									
3.a.	Victim's nam	e: <u>ASH2</u>	ey Perez	D.O.B. <u>//</u>	<u>6-₽</u> 4 Rac	e: <u>U</u> Sex: <u>F</u> : <u>3340</u> 8			
	Address:/	987 Jun	· RP	7.	·.				
	City:	0		State:	Zip	: 3340 B			
	Home #:		Work #:		Other	:561-596 236			
				,					
b.	Victim's next	of kin, friend	d or neighbor:	LINDA	Jou ce	33417			
	Address: 9	5 DORG	Herter	"E" WPB	R	33417			
	City:		· ·	State:	Zip):			
	Home #:	\(\frac{1}{2}\)	Work #:		Other	:: <u> </u>			
NOT					•				
NOT	E: PURSUANTTU) F.S. 119.07, TH	E CONTENTS OF	THIS FURM MAY B	E SUBJECT TO	CONFIDENTIALITY:			
Vic	tim/Relation	Notificati	on Waiver a	nd Confident	ial Inform	ation Request.			
(chec	k applicable boxe	es)	•						
	Waiver:	I choose no	t to be notifie	d when the arre	stee is relea	sed from custody.			
						-			
Confidential: I request the information on this form be kept confidential (applicable only to sexual battery, stalking, child abuse, harassment or domestic									
violence cases).									
Sign	ature of person v	waiving notif	ication:		SCANN	EU			
_					NOV 2 4 2	013			
	ted name of per				[D1]	// 22 2			
Dept	ıtv's Name:	ハペー ノメ	IACHER	ر#.I.D	ングフし、Da	te://-23-13			

White/Corrections or State Attorney (Warrant Application)

PBSO #0029A REV. 4/99

Pink/Central Records

Yellow/Warrants Section